TEWKSBURY CITIZENS' TAXATION FUND

FISCAL YEAR _____



Complete all sections fully. (Please print or type)

A. IDENTIFICATION		
Name of Applicant:	Marital Status:	
Social Security No.:	Telephone No.:	
Location of Property:	No. of Dwelling Units:	
Mailing Address (if different):		
Do you own the property?YesNo		
If yes, are you Sole Owner Co-Owner w Spouse	Co-Owner w Others	
Was property subject to a Trust? Yes No (If yes	s, please provide copy of Trust)
Have you been granted any exemption in any other city or town for this year?	Yes	_No
If yes, name of city or town:	Amount exempted:	
B. EXEMPTION STATUS		
Date of Birth: (If first year, attach a	copy of birth certificate)	
Have you owned and occupied the property as your domicile for at least 10 ye	ears? Yes	No
C. GROSS RECEIPTS FROM ALL SOURCES IN PRECEDING CALENDAR YEAR (Please provide copies of your most recent income tax return, social security statements, pension statement all W-2 and 1099 statements of earned income, and other receipts, if applicable.	ss, Applicant and Spouse	Co-Owner(s) and Spouse(s)
Retirement Benefits (SS, Railroad, Federal, State & Political Subdivisions) Other Pensions and Retirement Allowances Wages, Salaries and Other Compensation Net Profits from Business or Profession or Property Rental Interest and Dividends Other Receipts (Capital Gains, Public Assistance, etc.)		
TOTA	ıLS	

TEWKSBURY CITIZENS' TAXATION FUND

FISCAL YEAR _____



D. VALUE OF ALL PROPERTY OWNED ON JULY 1, this year.

(Please provide copies of all bank statements (Checking, Savings, CD's, IRA's, Stocks, Bonds, Insurance Policies, etc.) covering the period that includes July 1st)

REAL I	ESTATE:	Assessed Va	luation	Amount Du	ue on Mortgage	Value
	Domicile: Other:					
PERSC	ONAL ESTATE:					
Bank Accounts: Name and Address		Account Numbers		Value		
Stocks, Bonds, Securities, etc: Description		ption	Amount		Value	
	Motor Vehicles and	Trailers	Year ———	Make	Model	Value
	Other Non-Exempt F	Personal Propert	у	Description	1	Value
TOTAL VALUE:				\$		
E.	SIGNATURE:				DA	ATE:
Under	r pains and perjury, I de	eclare that to the	e best of my kno	owledge, all stat	ements and docum	ents are true.
		DISPOSITI	ON OF APPLICA	TION (ASSESSO	R'S USE ONLY)	
	Ownership Granted Occupancy Denied Status Deemed Denied		Amount	Co	mmittee:	
	Income Assets	Date Voted Certificate No.			_	
		Date Cert./Not				